SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 962 OF 1113 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 11d
	<u> </u>	12 13a 13b 14 15
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) NEW HAMPSHIRE FOR SCOTT BROV	/N	
Full Name (Last, First, Middle Initial)		
A: MR. WILLIAM D. YOUNG		Date of Receipt
Mailing Address 116 HIGH STREET		09 22 2014
City State	Zip Code	Transaction ID : SA11.381373
STRATHAM NH	4202	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer Occupation	n	250.00
OPTIMA BANK & TRUST BANKER		CONTRIBUTION
Receipt For: 2014 Election (Cycle-to-Date	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) MR. JAY ZAINO		Date of Receipt
Mailing Address 25 MULBERRY LANE		
City State	Zip Code	09 30 2014
PELHAM NH	2943	Transaction ID : SA11.383041
FEC ID number of contributing		Amount of Each Rossist this Desiral
federal political committee.		Amount of Each Receipt this Period
Name of Employer Occupation	חס	300.00
GXP AUTONATION, L.L.C. OWNER	4 - 14 - MARAGAN - 174 -	CONTRIBUTION
	Cycle-to-Date	
Primary General Other (specify)	300.00	
Full Name (Last, First, Middle Initial) MS. VALERIE ZAMMITO		Date of Receipt
Mailing Address 36 POPPONESSET ISLAND RD		
City State Zip Code		09 18 2014
MASHPEE MA	3843	Transaction ID : SA11.378596
FEC ID number of contributing	· · · · · · · · · · · · · · · · · · ·	Amount of Each Passint this Pasied
federal political committee.		Amount of Each Receipt this Period
Name of Employer Occupation	on	500.00
RETIRED RETIRED		CONTRIBUTION
Receipt For: 2014 Election of Primary X General	Cycle-to-Date	
Other (specify)	500.00	
Land Carrier Control Carrier Carrier Control Carrier C		
	1050.00	
SUBTOTAL of Receipts This Page (optional)		

TOTAL This Period (last page this line number only).....